Interview Summary	Application No. 09/385,651	Applicant(s) GREMINGER, MICHAEL
	Examiner Devona E. Faulk	Art Unit 2615	

All participants (applicant, applicant's representative, PTO personnel):

(1) _Devona E. Faulk_.   (3)_____.

(2) _Robert F. Bodi (Reg. No. 48540)_.   (4)_____.

Date of Interview: _____.

Type: a)☐ Telephonic   b)☐ Video Conference
c)☒ Personal [copy given to: 1)☐ applicant   2)☐ applicant's representative]

Exhibit shown or demonstration conducted: d)☐ Yes   e)☐ No.
If Yes, brief description: _____.

Claim(s) discussed: _____.

Identification of prior art discussed: _____.

Agreement with respect to the claims f)☐ was reached.   g)☐ was not reached.   h)☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: _Discussed possible amendment to claims. Examiner indicated that further searching would be necessary and that the applicant needed to provide, to the examiner, where the newly recited claim language is disclosed in the specification. Mr. Bodi is going to file a supplemental amendment to fix claim 23 and he will fax the examiner information regarding what part of the specification discloses the newly recited claim language.._

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an
Attachment to a signed Office action.

_____
Examiner's signature, if required